

## UNITED STATES DEPARTMENT OF COMMERCE

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	
		٦	EXAMINER		
			ART UNIT	PAPER NUMBER	
			DATE MAILED:		

Please find below and/or attached an Office communication concerning this application or proceeding.

Commissioner of Patents and Trademarks

See attached Examiner Interview Summery and Examiners amendment.



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				EXAMINER		
				ART UNIT	PAPER NUMBER	
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				DATE MAILED:		
		INTERVI	EW SUMMARY			
All par	rticipants (applicant, applicant	's representative, PTO personnel)				
(1)	Benny Le.	(070)			5.7	
(-/	T 56	(110)	_ (3) ·	•		
(2)	Jethrey V	yands	(4)		·	
Date o	of Interview	le rous	_			
Туре:	☑ Telephonic ☐ Televideo	Conference Personal (copy	is diven to Denotional D	oonline alle		
Exhibit	shown or demonstration coo	ductadi. Ova Maria		applicant s representat	ive).	
	The state of the s	ducted: Yes No If yes, br	ref description:			
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Agreen	nent 🛭 was reached. 🗆 wa	es not reached.				.+1 <sub>.</sub> 2
Claim(s	s) discussed:				:: ::	
Identific	cation of prior art discussed:_				the same	
•						
Descrip	otion of the general nature of v	that was agreed to if an agreemen	nt was reached, or any other o	comments:	•	
11	was agreed the	t the reference to	" Figs 10-12"	as presented	in the 2 Feb	
200	04 amendment w	the real to	رک الم ک	+.	111.00	
Δ.,	-1 1 4 H	the respect to page	7 or W specific	alion mas th	nproper.	
	orangly, in alloe	hed examiners one	ndment charge"	Figs. 10-12	to Frgs. 11, 11	
					-	
( A fuller must be attached	r description, if necessary, and attached. Also, where no co	a copy of the amendments, if av by of the amendments which wou	ailable, which the examiner ag Id render the claims allowable	greed would render the is available, a summa	daims allowable ry thereof must be	•
		to provide a separate record of the				
Unless t	the paragraph above has book	a chaolead to todione and a second	. ====	FPLV TO THE LAST O	EEICE ACTION	
action has SUBSTA	WAIVED AND MUST INCLUD as are ready been filed, APPL ANCE OF THE INTERVIEW	DE THE SUBSTANCE OF THE IN ICANT IS GIVEN ONE MONTH F	TÉRVIEW. (See MPEP Seci FROM THIS INTERVIEW DAT	on 713.04). If a reply to E TO FILE A STATEM	the last Office ENT OF THE	

Examiner Note: You must sign this form unless it is an attachment to another form.

FORM PTOL-413 (REV. 2-98)